

WEED & SEED WORLD OF WORK PGM



P.O. Box 12355
St. Thomas, V.I. 00801
340-776-1525



Ages 14 -15

Start: June 25, 2012 - End: August 10, 2012

LOCATION

Applicant's Name: _____ Gender: ___M___F___ D.O.B: _____ Age: _____

Last Grade Completed: ___ School Attended _____ Promoted ___ Detained ___
Attach Report Card _____

School Counselor's Name: _____

Career Interest # 1 _____ #2 _____

I would like to work at: _____, _____

I would like to own my own business doing: _____, _____

I have completed community service in the past: ___Yes___No___

Primary Language spoken at home: _____ Physical Address: _____

Home Mailing Address: _____ Home Phone # _____

Alternate # _____ E-mail Address: _____

Does your child have any allergies?: ___Yes___No___ *If yes, please indicate on Health history form attached.* Is your child covered by any medical insurance ___Yes___No___, If yes please provide a copy of the document.

Father's Name: _____ Mother's Name: _____

Work Phone #: _____ Work Phone #: _____

T-Shirt Size

Child: ___Small(4-5)___ ___Medium(6-8)___ ___Large (10-12)___ ___X-Large (14-16)___
Adult: ___Small___ ___Medium___ ___Large___ ___X-Large___ ___2XL___

I _____ agree to meet a minimum of twice per month to perform my community service requirements until June, 2012.

Weed and Seed has my permission to take pictures of my child for the purpose of promoting the program, ___yes___ ___no___.

Parent/Guardian Signature

Date

Free meals will be provided by the Department of Education's School Lunch Program or other Lunch Programs Sponsor regardless of race, color, sex, age, disability or national origin.